

REPORT TO CITY CLERK  
SPECIAL DESIGNATED LICENSE APPLICATION

#278

☒ Police  
☐ City Attorney  
☐ Bureau of Fire Prevention  
☐ Health Department

DATE: 8/25/06  
Return by: 9/14/06

CATERER:

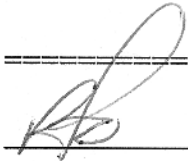
NON-CATERER: X

APPLICANT NAME & ADDRESS: MCGILL'S PUB INC., 1830 N 72<sup>ND</sup>, OMAHA NE 68114

ADDRESS OR LOCATION OF PREMISES TO BE COVERED BY LICENSE: PRIVATELY-OWNED  
PARKING LOT, 605 N 8<sup>TH</sup> ST

DATE (S) & TIME(S) OF EVENT : SEPTEMBER 29, 2006; 5:00 PM TO 11:30 PM  
Alternate Dates: None

RECOMMENDATION OF APPROVAL OR DENIAL

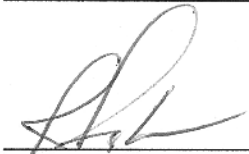


APPROVED

CONDITIONS ① ARM BANDS OR SIMILAR REQUIRED FOR PERSONS  
CONSUMING ② NO MORE THAN 2 BEVERAGES SOLD TO ANY ONE  
PERSON DURING ANY SALE

DENIED

REASON(S) FOR \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Signature

843

8-28-06

Date

(If needed, use back for additional space)

PUBLIC HEARING BEFORE COUNCIL: 9/18/06

(SDLRPT.JER)

278

# APPLICATION FOR SPECIAL DESIGNATED LICENSE

Submit to: **City Clerk's Office**  
555 S. 10<sup>th</sup> Street, Lincoln, NE 68508  
(402) 441-7436

PLEASE TYPE OR PRINT; APPLICANT MUST COMPLETE ALL SECTIONS OF THIS FORM

## INSTRUCTIONS

- ☐ All Applications must be received in the City Clerk's Office **21 CALENDAR DAYS PRIOR** to the date of the event (the day of the event, is **not** counted)
- ☐ Complete and return the **ORIGINAL and THREE COPIES** to the City Clerk's Office
- ☐ **FEES:** If applicant does not have a liquor caterer's license, then a license fee of **\$40 is due** (per day) and made payable to the **Nebraska Liquor Control Commission** and a license fee of **\$80 is due** (per day) payable to the **City of Lincoln**
- ☐ **TWO SEPARATE CHECKS**
- ☐ **INDOOR EVENTS** for Special Designated Licenses are approved by the City Clerk
- ☐ **OUTDOOR EVENTS** for Special Designated Licenses may require City Council approval. Applicant is required to attend a public hearing if Council approval is required

1. Type of Beverage(s) to be served: ☒ Beer ☐ Wine ☐ Distilled Spirits

2. Name and Full Address of Applicant: (City, State, County, Zip) McGill's Pub Inc License number and Class (Example C/K) → 60185 C  
1830 N 72nd Omaha 68114

3. Address or location of premises to be covered by license: (City, County, Zip Code) 605 N. 8th St. Lincoln NE 68508

4. Is this PREMISE currently licensed under the Nebraska Liquor Control Act? ☒ Yes ☐ No

5. Name and Address of the owner or lessee and name of principal occupant of the premises for which the license is requested.

Baron McGill 18133 Willow Creek Omaha NE 68188

6. Please list the name and telephone number of the primary event supervisor, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. Supervisor must sign on Page 2.

JAB Productions LLC  
BRAD JONES 402-659-4388

7. Date(s) of Event: (If a Sunday, sales are limited to 12 noon to 1am the following Monday)

9-29-06

List Alternate Date or Location in the Event of Bad Weather: \_\_\_\_\_

FILED

8. Time(s) of Event: (Example 8am to 1am, is considered one day)

FROM: 5pm TO: 11:30pm

AUG 25 2006

9. Describe the Type of Activity to be carried on during the time period for which the license is requested. **CITY CLERK'S OFFICE LINCOLN, NEBRASKA**

OUTDOOR MUSIC CONCERT

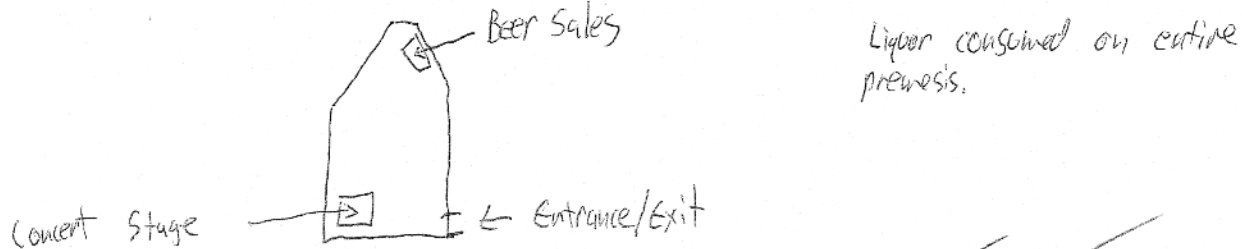
10. Provide an Estimated Number of Attendees at this Event 3000. If the number of attendees is over 150, attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages. will be using wrist bands issued by Baron McGill - will have fenced in beer garden. will have additional security guards walking the premises

11. List the Number of SDL's that you have applied for at this specific location in the last six months 0

- Page 1 of 2 -

12. Description of the Premises: ☐ Inside Building ☒ Outdoor Area → ☐ Attach City Supplemental Form

Dimensions of the area (in feet) to be covered by license: 64 to 346 x 390. Please draw in the space provided below, the area where liquors will be sold and consumed. (Length) (Width)



If outdoor area, how will premises be separated from areas open to the general public? ☒ Fence ☒ Tent ☐ Other  
If marked Fence, please describe the type: GFT cyclone fence  
If marked Other, please explain:

Outdoor Events require the City Supplemental Form to be attached.

13. Is the premises to be covered by the license located within the city limits? ☒ Yes ☐ No
14. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children? ☐ Yes ☒ No
15. Is the premises to be covered by the license within 300 feet of any university or college campus? ☒ Yes ☐ No
16. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number. McEllis Pub 60185C
17. Will the premises to be covered by the license comply with all Nebraska sanitation laws? ☒ Yes ☐ No
18. Are there separate toilets for both men and women? ☒ Yes ☐ No
19. Will there be any games of chance operating during the event? ☐ Yes ☒ No  
**Notice:** Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non-Profit Organizations. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.
20. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.
- |   |                           |                           |                                |
|---|---------------------------|---------------------------|--------------------------------|
| Signature <u>B. J. McEllis</u><br>(Authorized Representative/Applicant) | <u>UP</u><br>(Title)      | <u>8/21/06</u><br>(Date)  | <u>402-670-6337</u><br>(Phone) |
| Signature <u>[Signature]</u><br>(Supervisor)                            | <u>Partner</u><br>(Title) | <u>08/23/06</u><br>(Date) | <u>402-659-4388</u><br>(Phone) |

The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the City Clerk of Lincoln, Nebraska.

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format. <http://www.nol.org/home/NLCC/>

\* THE FOLLOWING SUPPLEMENTAL FORM IS REQUIRED FOR ALL OUTDOOR EVENTS \*

SPECIAL DESIGNATED LICENSE APPLICATION  
SUPPLEMENTAL FORM

The Special Designated License process is not intended to be used as a means to expand the existing licensed premise.

Name of Event: Under the Foot bridge

Applicant and Sponsoring Organization or Person (if applicable): McGill Pub - SAB Productions LLC

Date of Event: Sept 29, 2006

Time of Event: 5pm - 11:30 pm

Has the applicant applied for and received liquor liability insurance?

☒ Yes ☐ No

Number of persons expected to attend: 3000

Number of persons under 21 expected: 1000?

Is the event open to the public?

☒ Yes ☐ No

How will you ensure that minors will not be served or consume beverages containing alcohol: will be using Bartenders issued by Security Personnel, Addition Security Personnel will insure no minors drinking will sell Beer in a designated Area where minors are not allowed.

Will food be served?

☒ Yes ☐ No Nashville Neighborhood Concessions

If yes, please list food to be served: chilly's, Hamburger, Hot dogs - fries, chix fingers, onion rings, shrimp, nacho's, nacho supreme, pop corn, Bterito's,

Will non-alcoholic beverages be served:

If yes, please list non-alcoholic beverages to be served: Soda Pop. WATER, COFFEE,

Cappucino, Ice tea,

Please identify the beverages containing alcohol that will be served:

☐ Wine ☒ Beer ☐ Distilled Spirits

Will this be a cash or complimentary bar?

☒ Cash ☐ Complimentary

Who will serve the beverages containing alcohol? McGill's Pub

Have the designated servers received responsible beverage service training?

☒ Yes ☐ No

Will there be a charge for admission?

☒ Yes ☐ No

In the last 12 months, have you received notice of a liquor law violation that occurred during an event at which you were the special designated licensee?

☐ Yes ☒ No

If so, explain:

B. McGill  
Applicant's Signature

8/21/06

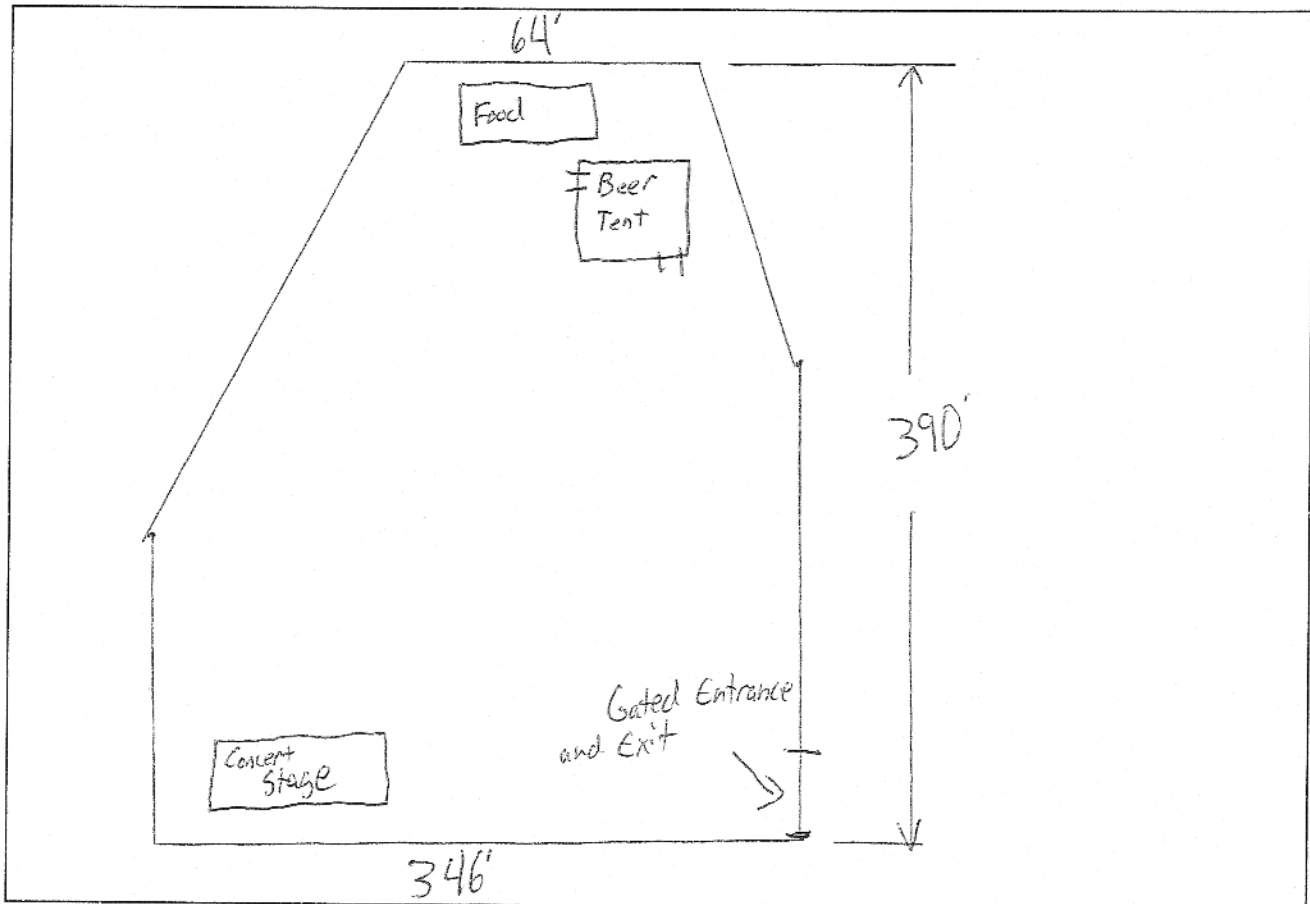
Date

**\*THE FOLLOWING SUPPLEMENTAL FORM IS REQUIRED FOR ALL OUTDOOR EVENTS\***

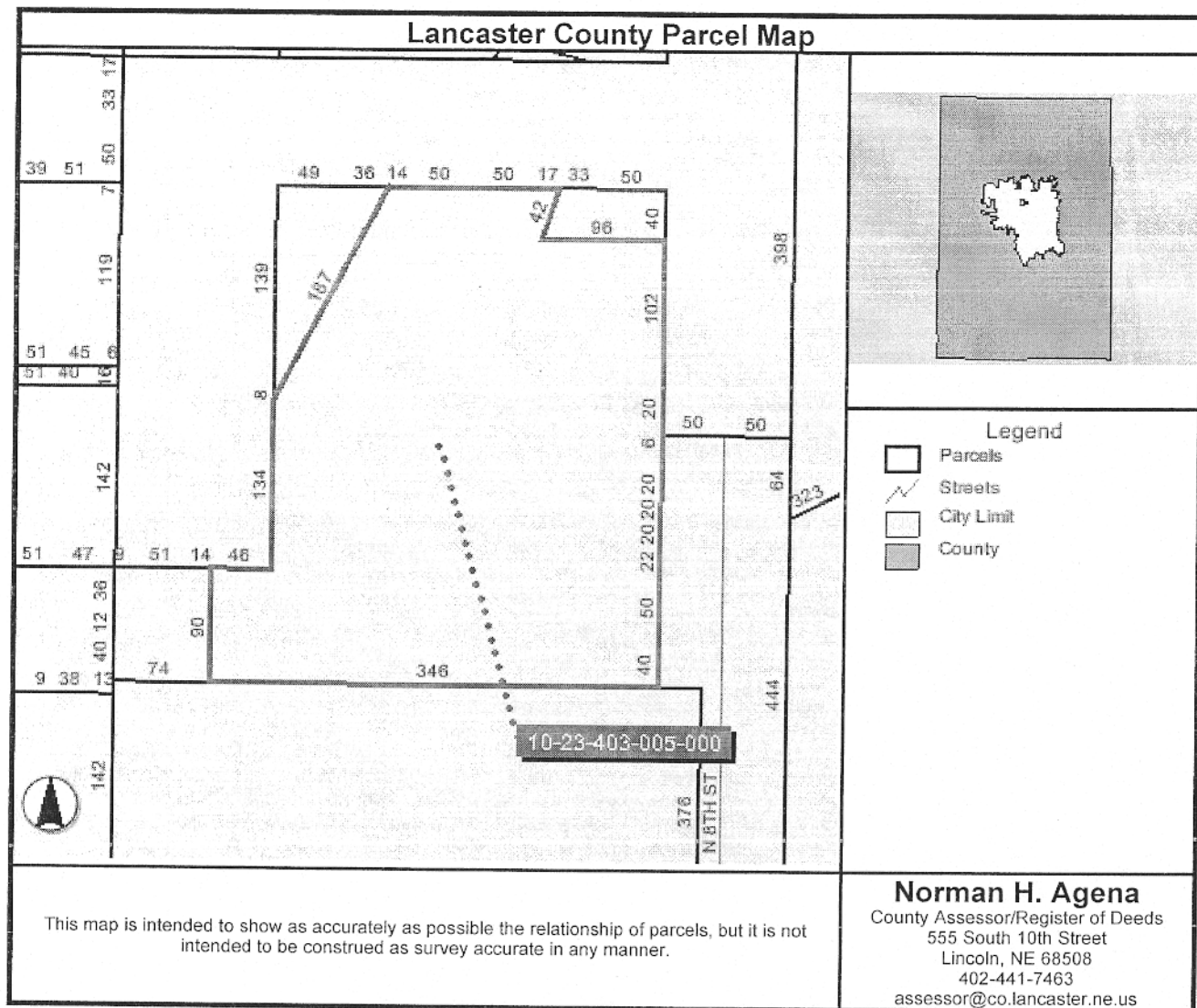
**SUPPLEMENTAL FORM FOR SITE PLAN INFORMATION**

Please provide a drawing showing the following. Provide as much detail as possible to ensure your application is not returned to you for more information. Attach additional drawings, dimensions if necessary.

1. Number of Entry & Exit Points & Dimensions: 1 ENTRY 1 EXIT  
(height & width) ( ) x ( )
2. Size & location of tent(s): approx 20 x 70, Located on North portion  
(heights, width, depth) ( ) x ( ) x ( )
3. Size of area being used: approx 110438 sq ft  
(height & width) ( ) x ( )
4. Location & type of cooking equipment (if used) Mobile equipment located on north portion.
5. Location of tables & chairs: None  
(If stage for band provided & dance area, show dimensions & site on drawing.)
6. Height & type of fencing to be used: 6 foot orange cyclone  
(height) (6 )



*Please see attached maps.*







# CITY OF OMAHA, Nebraska

NO. 64708

THIS CERTIFICATE IS NOT TRANSFERABLE

NAME

MCGILL'S PUB INC  
1830 N 72 ST  
OMAHA NE 68114

LOCATION MCGILL'S PUB INC  
1830 N 72 ST  
OMAHA NE 68114

INSPECTOR#

1	CLASS C LIQUOR PUBLICATION FEE LIQUOR CLASS C	1	1	26.00	26.00
2	CLASS C LIQUOR LICENSE ORD 19 62	1	1	300.00	300.00
3	CLASS C LIQUOR OCCUPATION TAX LIQUOR CLASS C	1	1	600.00	600.00

PLACE IN A CONSPICUOUS PLACE

EFFECTIVE DATE 31-OCT-05

EXPIRATION DATE 31-OCT-2006

DIVISION

BY

*Betsy Brown*

City of Omaha Cashier  
RM H10  
1819 Farnam St.  
Omaha NE 68183



MCGILL'S PUB INC  
1830 N 72 ST  
OMAHA NE 68114

COPY



PRODUCER (402)391-2900 Ext.  
Moore's Insurance & Investment  
House Account  
2580 South 90th Street

Omaha, NE 68124

INSURED MCGILL'S PUB INC.  
1830 N. 72ND STREET

OMAHA, NE 68114

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURER A: AUTO OWNERS INSURANCE

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	034620-39605057-03	08/01/2006	08/01/2007	EACH OCCURRENCE \$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$100,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$5,000
					PERSONAL & ADV INJURY \$1,000,000
					GENERAL AGGREGATE \$1,000,000
					PRODUCTS - COMP/OP AGG \$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	HIRED AUTOS				
	NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
					\$
	DEDUCTIBLE				\$
	RETENTION \$				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	031720 39885929	08/01/2006	08/01/2007	WC STATU-TORY LIMITS OTH-ER
					E.L. EACH ACCIDENT \$100,000
					E.L. DISEASE - EA EMPLOYEE \$100,000
					E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER	034620-39605057-03	08/01/2006	08/01/2007	CONTENTS 30,000

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

COPY

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*[Signature]*

APPLICATION FOR SPECIAL DESIGNATED LICENSE  
LICENSEE

NEBRASKA LIQUOR CONTROL COMMISSION  
P.O. Box 95046  
Lincoln NE 68509-5046

ALL ISSUED LICENSES ARE MAILED TO LOCAL CLERKS WHERE THE EVENT IS HELD

- ☐ All Applications must be received in the Commission Office 10 working days (excluding weekends and holidays) prior to the date of the event
- ☐ Complete and return **THE ORIGINAL WITH A DUPLICATE** to the Nebraska Liquor Control Commission
- ☐ A license fee of \$40 (payable to Nebraska Liquor Control Commission) for each day (no fees if caterer)
- ☐ **APPROVAL FROM CITY, VILLAGE OR COUNTY CLERK** must be included with this application
- ☐ A Signed Statement from Local Police Chief or County Sheriff

1. Type of Beverage(s) to be served or consumed: ☒ Beer ☐ Wine ☐ Distilled Spirits

2. License number and class 60185 C ☒ Retailer ☐ Caterer  
(i.e. I/K-12345)

3. **Name and Address** of Applicant (as listed on liquor license) (City, County, Zip Code)  
McGill's PUB INC 1830 N 72nd Omaha NE 68114 <sup>Douglas</sup> ~~88114~~

4. **Address or location** of premises to be covered by license, (street, city, county, zip code)  
605 N. 8th St Lincoln NE LANCASTER 68508

5. Address of where alcohol is to be stored if other than at location listed in question #4 above stored in trailer

6. Name, address, phone number/cell phone number of owner or lessee of premises for which the license is requested  
Bryan McGill 15133 Willow Creek Avia Omaha 68137 <sup>402-670</sup> <sup>4837</sup>

7. **DATE(S) OF EVENT** (If Sunday, attach Sunday sales ordinance) no more then six (6) consecutive days per application 62906

a) If alternate date is requested please list below: (must be approved at local level prior to event)

ALTERNATE DATE: None

b) If alternate location is requested please list below: (must be approved at local level prior to event)

ALTERNATE LOCATION: None

8. Time(s) of event (example 8:00 am to 1:00 am, this is considered one day)

FROM: 5pm TO: 11:30pm

9. Describe type of activity to be carried on during the time period for which the license is requested

outdoor concert

10. Provide an estimated number of attendees at this event 3000. If the number of attendees is over 150 attach a separate page indicating the steps that will be taken to prevent underage persons access to alcoholic beverages.

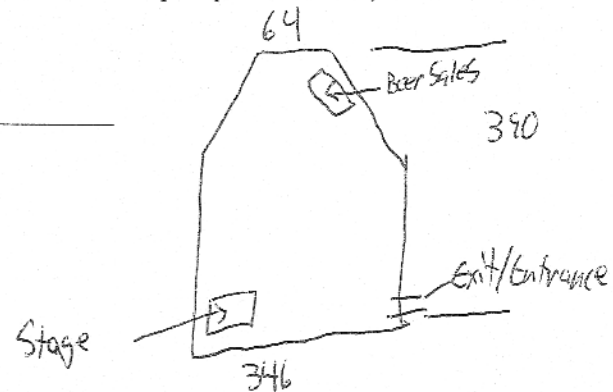
11. **Attach** a signed statement from your local police chief or county sheriff, whichever is applicable, that local law enforcement has been informed in advance of this event, and if they are aware of any reason the event should not occur

12. Description of the premises: ☐ Inside Building ☒ Outdoor Area

Dimensions of area to be covered by license: \_\_\_\_\_ x \_\_\_\_\_. Please draw in the space provided below, the area where liquors will be sold and consumed. LENGTH WIDTH (In feet)

If outdoor area, how will premises be separated from areas open to the general public?

- ☐ Fence, type of fence Cyclone Fence 6FT  
☐ Tent  
☐ Other (if other, please explain)



13. Is the premises to be covered by the license located within the city/village limits?..... ☒ YES ☐ NO

14. Is the premises to be covered by the license within 150 feet of any church, school, hospital, or home for the aged or indigent persons or for veterans, their wives or children?..... ☐ YES ☒ NO

15. Is the premises to be covered by the license within 300 feet of any university or college campus?..... ☒ YES ☐ NO

16. Explain how alcoholic liquors will be purchased by the licensee. If purchased from a retail licensee, please give the name and license number. McGill's Pub 1830 N 72 Omaha NE 68114

Check here if for consumption only ☒ (no purchases or sales, i.e. byob)

17. Will the premises to be covered by the license comply with all Nebraska sanitation laws?..... ☒ YES ☐ NO

18. Are there separate toilets for both men and women?..... ☒ YES ☐ NO

19. Other information or requests for exemptions, must be requested and approved prior to event:

20. Will there be any games of chance operating during the event? ☐ YES ☒ NO If so, describe activity

**NOTICE:** Only games of chance approved by the Department of Revenue, Charitable Gaming Division are permitted. All other forms of gambling are prohibited by State Law: There are no exceptions for Non Profit Organizations or any events raising funds for a charity. This is only an application for a Special Designated License under the Liquor Control Act and is not a gambling permit application.

21. Name and telephone number/cell phone number of immediate supervisor, who will actually be present at the location of the event when it occurs, that can be contacted by law enforcement before and during the event, and who is responsible for ensuring that any applicable laws, ordinances, rules and regulations are adhered to. Supervisor must sign on page 3.

BRAD Jones 402-659-4388 Bryan McGill 402-670-6337

22. I declare that I am the authorized representative of the above named license applicant and that the statements made on this application are true to the best of my knowledge and belief. I also consent to an investigation of my background including all records of every kind including police records. I agree to waive any rights or causes of action against the Nebraska Liquor Control Commission, the Nebraska State Patrol or

any other individual releasing said information to the Liquor Control Commission or the Nebraska State Patrol. I further declare that the license applied for will not be used by any other person, group, organization or corporation for profit or not for profit and that the event will be supervised by persons directly responsible to the holder of this Special Designated License.

sign here  VP 8/21/06  
Authorized Representative/Applicant Title Date

\_\_\_\_\_  
Print Name

sign here  Partner 8/23/06  
Supervisor Title Date

Brad D Jones JAB Productions LLC  
Print Name

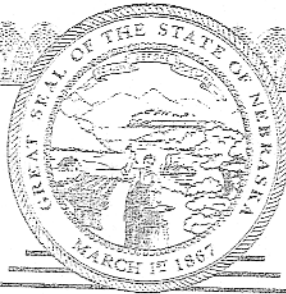
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The law requires that no special designated license provided for by this section shall be issued by the Commission without the approval of the local governing body. For the purposes of this section, the local governing body shall be the city or village within which the particular place for which the special designated license is requested is located, or if such place is not within the corporate limits of a city or village, then the local governing body shall be the county within which the place for which the special designated license is requested is located.

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In Compliance with ADA, this form is available in other formats for persons with disabilities.  
A ten day advance period is requested in writing to produce the alternate format.

STATE OF



NEBRASKA

LIQUOR LICENSE

GRANTED UNDER PROVISIONS OF

NEBRASKA LIQUOR CONTROL ACT

60185

CLASS C - ALCOHOLIC LIQ ON/OFF SALE  
(INSIDE CORPORATE LIMITS)

LICENSEE

MCGILL'S PUB INC  
1830 N 72 STREET

OMAHA

NE 68138

PREMISE

MCGILL'S PUB  
1830 N 72 STREET

OMAHA

DOUGLAS

NE 68114

LEGAL DESCRIPTION:

ONE STORY BLDG APPROX 57 X 57, INCLUDING 12 X 16 BEER GARDEN ON  
THE SOUTH SIDE AND 45 X 69 VOLLEYBALL COURT ON WEST SIDE OF BLDG

WHEREAS, THE ABOVE HAS ON FILE WITH THE LIQUOR COMMISSION AN  
APPLICATION AND BOND AS REQUIRED BY LAW WHICH HAS BEEN DULY APPROVED,  
AND HAS PAID ALL FEES REQUIRED BY LAW, AS PROVIDED IN THE NEBRASKA  
LIQUOR CONTROL ACT.

LICENSE PERIOD: 11/01/2005 - 10/31/2006

UNLESS SOONER REVOKED, SUBJECT TO THE PROVISIONS OF SAID ACT AND  
SUCH RULES AND REGULATIONS AS MAY HAVE BEEN OR MAY HEREAFTER BE  
PROMULGATED OR ADOPTED.

COPY

Attest

NEBRASKA LIQUOR CONTROL COMMISSION